



Operational note: Commissioning recommendations for national procurement for DOACs

January 2022, Version 1

National procurement for direct acting oral anticoagulants (DOACs)

Purpose

The NHS expects to spend more on DOACs in the future than today as more patients with atrial fibrillation (AF) are diagnosed and treated. The intent of the recent procurement exercise (concluded in October 2021) was that any savings released would allow more patients with AF and other cardiovascular disease (CVD) to be diagnosed and treated. These commissioning recommendations therefore outline the best value treatment choices and if followed, will make it more affordable to treat these additional patients.

Referring to the new DOAC framework agreement, Helen Williams – NHS England and NHS Improvement national specialty adviser for CVD prevention – said:

“The new agreement for these drugs is good news for the estimated 1.5 million people in England with [AF]...by ensuring these drugs are made available for all people with [AF] who are at risk of stroke, the NHS will not only prevent serious harm to the people affected, but avoid the need for aftercare which puts additional pressure on the health service.

“Tackling heart disease and stroke is a top priority in the NHS Long Term Plan, which will save thousands of lives by better diagnosis and treatment for people with killer conditions.”

All DOAC indications

It is for the prescribing clinician to determine which DOAC(s) are clinically appropriate for an individual patient based upon the relevant NICE technology appraisal guidance.

Atrial fibrillation

Treatment options

NICE guidance (NG196 1.6.3 and 1.6.4 published 27 April 2021) states that: “apixaban, dabigatran, edoxaban and rivaroxaban are all recommended as options for the treatment of atrial fibrillation, when used in line with the criteria specified in the relevant NICE technology appraisal guidance.”

NICE guidance (NG196 1.6.5 published 27 April 2021) states that: “if DOACs are contraindicated, not tolerated or not suitable in people with atrial fibrillation, then offer a vitamin K antagonist.”

Reviewing treatment

NICE guidance (NG196 1.6.6 published 27 April 2021) states that: “for adults with atrial fibrillation who are already taking a vitamin K antagonist and are stable, continue with their current medication and discuss the option of switching treatment at their next routine appointment, taking into account the person's time in therapeutic range.”

NICE guidance (NG196 1.6.16 published 27 April 2021) states that: “For people who are taking an anticoagulant, review the need for anticoagulation and the quality of anticoagulation (taking into account MHRA advice on direct-acting oral anticoagulants about bleeding risk and the need to monitor renal function in patients with renal impairment) at least annually, or more frequently if clinically relevant events occur affecting anticoagulation or bleeding risk.”

Treatment selection

For patients commencing treatment for AF: subject to the criteria specified in the relevant NICE technology appraisal guidance, clinicians should use edoxaban where this is clinically appropriate. If edoxaban is contraindicated or not clinically appropriate for the specific patient then, subject to the criteria specified in the relevant NICE technology appraisal guidance, clinicians should then consider rivaroxaban first, then apixaban or dabigatran.

For patients already prescribed a DOAC for the treatment of AF: subject to the criteria specified in the relevant NICE technology appraisal guidance, commissioners may wish to consider developing local policy to review patients currently prescribed apixaban, rivaroxaban or dabigatran, where clinically appropriate.

Latest patent expiry dates

Based upon the latest patent expiry dates, the DOACs that are currently prescribed for more than 95% of patients, will remain patent protected until at least 2026. The latest patent expiry dates are:

- August 2023 – Dabigatran (Predaxa®)
- January 2026 – Rivaroxaban (Xarelto®)
- November 2026 – Apixaban (Eliquis®)
- April 2028 – Edoxaban (Lixiana®)

Detect, Protect and Perfect Initiatives

Daiichi Sankyo have proposed four Detect, Protect or Perfect initiatives that have been approved by NHS England and NHS Improvement for consideration by local commissioners. For further details on the Daiichi Sankyo and NHS England and NHS Improvement initiatives and how to access them, contact scm.procurements@nhs.net.

Detect, Protect and Perfect Investments

Daiichi Sankyo have committed to provide a Detect, Protect and Perfect investment on each pack of edoxaban prescribed, while Bayer have committed to an investment on each 20mg x 28 pack of rivaroxaban prescribed.

The investments can be used to fund any of Daiichi Sankyo's four Detect, Protect or Perfect initiatives, and the wider CVD and stroke prevention agenda. Further details will be announced in due course.

Summary of DOAC presentations via the NHS National DOAC Framework Agreement for England

Generic name	Brand name	Strength	Pack size
Edoxaban	Lixiana®	15mg	10
		30mg	28
		60mg	28
Rivaroxaban	Xarelto®	10mg	30
		10mg	10
		15mg & 20mg	49
		15mg	14

		15mg	28
		15mg	42
		20mg	28
Apixaban	Eliquis®	2.5mg	10
		2.5mg	20
		2.5mg	60
		5mg	56
		5mg	28